PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Opt	ional) 021574-000220US
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			
Application Number 10/611,838		Filed June 30, 20	03
For METHOD AND APPARATUS EMPLOYING ULTE ENERGY TO TREAT BODY SPHINCTERS	RASOUND		
Art Unit: 3768		Examiner HORWAT, JENNIFER A	
This is a request under the provisions of 37 CFR 1.136 application.	i(a) to extend the per	· · · · · · · · · · · · · · · · · · ·	
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below);			
<u></u>	Fee	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
Three months (37 CFR 1,17(a)(3))	\$1020	\$510	\$ 510
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR	31,27,		
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or gradit any events.			
I have enclosed a duplicate conv of this sheet			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the applicant/inventor,			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
attorney or agent of record. Registration Number 29,541			
attorney or agent under 37 CFR 1.34.			
Redistration number if acting und	ler 37 CFR 1.34		
		Novembe	2 2008
Signature		Da	
James M. Heslin, Reg. No. 29,541 Typed or printed name		650.326.2400	
		Telephone Number	
OTE: Signatures of all the inventors or assignees of record of the entire as signature is required, see below.	interest or their represents	itive(s) are required. Subm	it multiple forms if more than
Total of forms are subr	nitted.		